

## ECS Configuration Change Request

Page 1 of 1 Pages

CCR No. 98- 0123	Logged Date 02-02-98	Rev. -	Request Type CCR
Priority Routine <input type="checkbox"/> Urgent <input type="checkbox"/> Emergency <input checked="" type="checkbox"/>	Affected Release B	Change Class IN	
Title (description) Install Builder Xcessory 3.5.1 in the EDF.			
Documents Affected N/A		Source Nos (RID, NCR, Action Item, GSFC CCR, etc.) or Tech Reference N/A	
RTM Change <input type="checkbox"/> Start New Baseline <input type="checkbox"/>			
Problem MSS Subsystem is requesting to test the latest version of Builder Xcessory 3.5.1 in the EDF.			
Proposed Solution Install Builder Xcessory 3.5.1 /ecs/cots/builderXcessory351 from Integrated Computer Solutions on "MSS1" EIN#4451, "RELBHPMS" EIN#1395, "COMANCHE" EIN#1223. A two-week test evaluation of the latest version will be conducted in the EDF. Another CCR will follow requesting a change to the Release B COTS Baseline if the bug fixes to the GUI are resolved. In addition, to installing Xcessory 3.5.1 upgrades in other environments affected by the baseline change.			
Impact Analysis: Organizations Affected: BOO <input type="checkbox"/> Contracts <input type="checkbox"/> ECS Chief Eng <input type="checkbox"/> FOS <input type="checkbox"/> M&O <input type="checkbox"/> Procurement <input type="checkbox"/> QO <input type="checkbox"/> Rel. Dev <input checked="" type="checkbox"/> Rel. A <input type="checkbox"/> Rel. C <input type="checkbox"/> SCDO Arch. <input type="checkbox"/> Science Off <input type="checkbox"/> Security <input type="checkbox"/> Subcontract <input type="checkbox"/> Sys. Eng <input type="checkbox"/> Sys Verif Acpt <input type="checkbox"/>			
Need by Date: 2/06/98			
Cost: None <input checked="" type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> (Not exceeding \$100,000) (\$100,000 to \$500,000) (Over \$500,000)			
Schedule: None <input type="checkbox"/> Other <input type="checkbox"/>			
Additional LOC _____ Man-Months _____ Materials _____			
Originator Michelle D. Johnson		Signature _____ Date 1/30/98	
Office Development Office Manager		Signature _____ Date 1/30/98	
Disposition Approved <input type="checkbox"/> Approved w/Comment <input type="checkbox"/> Forward <input type="checkbox"/> Disapproved <input type="checkbox"/>			
Comments:  CCB Chairperson _____ Signature _____ Date _____			

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